

EXHIBIT A



NYCLU
NEW YORK CIVIL LIBERTIES UNION



New York
COMMON CAUSE
Holding Power Accountable

**NYCLU – Common Cause New York
New York Election Protection Effort**

PROBLEM LOG

COUNTY _____

NAME OF VOLUNTEER _____

CITY or TOWN _____ **ELECTION DISTRICT** _____

POLLING LOCATION _____

TIME OF DAY _____

TYPE OF PROBLEM

<input type="checkbox"/> Voter registration problem
<input type="checkbox"/> Voter ID problem
<input type="checkbox"/> Felon Disfranchisement
<input type="checkbox"/> Voter Challenge by _____
<input type="checkbox"/> Electioneering within 100 feet

<input type="checkbox"/> Voter Intimidation
<input type="checkbox"/> Disability issues
<input type="checkbox"/> Equipment/Ballot problems
<input type="checkbox"/> Other Polling Place Problem (described below)

DESCRIPTION OF PROBLEM (Include Source & Location of Problem if Known)

WHAT DID VOLUNTEER DO? _____

CALL TO 1-866-OUR VOTE MADE? ☐ YES ☐ NO

WHO MADE THE CALL? _____

VOTER CONTACT INFO. (NOT REQUIRED—ONLY IF VOTER WANTS TO KEEP IN TOUCH!)

Name of Voter _____

Address _____

Phone number (_____) _____ (@ home / cell / work)¹

Email _____

ANY OTHER COMMENTS:

